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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Patent Application of:
Biran, Glora et al

Docket No. IL920000076US1

Serial No.: 10/619,960

Group Art: 2181

Filed: 07/15/2003

Confirmation No. 7798

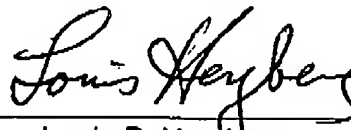
For: Transferring interrupts from a peripheral device to a host computer system

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<p align="center">CHANGE OF CORRESPONDENCE ADDRESS Application</p> <p>Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.</p>		Application Number		10/619,960																																					
		Filing Date		07/15/2003																																					
		First Named Inventor		Giora Biran																																					
		Art Unit		2181																																					
		Examiner Name																																							
		Attorney Docket Number		IL920000076US1																																					
<p>Please change the Correspondence Address for the above-identified patent application to:</p> <p>Customer Number: 54856</p> <p>OR</p> <table border="1"> <tr> <td colspan="6">Firm or Individual Name</td> </tr> <tr> <td colspan="6">Address</td> </tr> <tr> <td colspan="6">Address</td> </tr> <tr> <td colspan="2">City</td> <td colspan="2">State</td> <td colspan="2">Zip</td> </tr> <tr> <td colspan="6">Country</td> </tr> <tr> <td colspan="3">Telephone</td> <td colspan="3">Fax</td> </tr> </table> <p>This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).</p> <p>I am the:</p> <p>Applicant/Inventor</p> <p>Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> Attorney or Agent of record. Registration Number 41,500</p> <p>Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number</p> <p>Typed or Printed Name Louis P. Herzberg</p> <p>Signature <i>Louis Herzberg</i></p> <p>Date Dec 26, 2005 Telephone 845-352-3194</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p>Total of forms are submitted.</p>						Firm or Individual Name						Address						Address						City		State		Zip		Country						Telephone			Fax		
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